

DECLARATION AND POWER OF ATTORNEY

Attorney's Docket No.
17410-00008

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **METHODS AND SYSTEMS FOR INTEGRATING MARKETING, PRODUCTION, AND FINANCE**, the specification of which:

(check one) ☒ is attached hereto
☐ was filed on _____ as Application Serial No. _____,
and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim priority benefits under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status (patented, pending, abandoned)
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application Serial No.	Filing Date	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/237,108	9/29/00	
_____	_____	
_____	_____	

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(list name and registration number)*

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Variable	Mean	SD	Min	Max
Age	34.5	10.2	21	55
Gender	0.5	0.5	0	1
Marital status	0.6	0.5	0	1
Education	12.5	1.5	9	16
Income	1500	500	500	3000
Health status	0.8	0.2	0	1
Smoking status	0.3	0.5	0	1
Alcohol consumption	0.2	0.4	0	1
Exercise frequency	0.5	0.5	0	1
Stress level	0.7	0.3	0	1
Work satisfaction	0.6	0.4	0	1
Life satisfaction	0.7	0.3	0	1
Depression score	10.5	5.0	0	30
Anxiety score	12.0	6.0	0	30
Quality of life score	75.0	10.0	50	100